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**£**001888.0001 (ACU-101) **PATENT** IN THE UNITED STATES PATENT AND TRADEMARK OFFICE Application of: Telfair et al. Group Art Unit: 3739 Serial No.: 09/307,988 Examiner: D. Shay Filed: May 10, 1999 For: SHORT PULSE MID-INFRARED PARAMETRIC GENERATOR FOR SURGERY **Assistant Commissioner for Patents** Washington, DC 20231 AMENDMENT UNDER 37 C.F.R. § 1.111 Sir: In response to the Office Action dated January 3, 2001, please amend the above-identified application as follows: **IN THE CLAIMS:** Please cancel Claims 24 and 25 without prejudice. Please replace original Claims 17-19, 21, 26-28, 33, 36, 39 and 41-44 with the

following amended Claims 17-19, 21, 26-28, 33, 36, 39 and 41-44:

in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on

Date of Deposit

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail

July 3, 2001

Date of Signature

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CORRE	Application of:	A	(I)	TRADEWARK OF TR
n re	Application of:	)		
Telfai	r et al.	)	G	
Serial	No.: 09/307,988	)	G	oup Art Unit: 3739
Filed:	May 10, 1999	)	Ex	caminer: D. Shay
For:	SHORT PULSE MID-INFRARED PARAMETRIC GENERATOR FOR S	UR	RGF	ERY

Commissioner for Patents Washington, DC 20231

## **AMENDMENT TRANSMITTAL**

Sir:

- 1. Transmitted herewith is an Amendment under 37 C.F.R. § 1.111 for the above-identified application and a return post card.
  - 2. The Applicant is a small entity.
- 3. [X] No additional fee is required.
  - The additional fee has been calculated as shown below:

## **CERTIFICATE OF MAILING**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231

Date: July 3, 2001 | Name: Kuly Way+Usduf | Signature: Kully S. Wolfes Date

JUL 0 9 2001

TO TRADEMACE	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee
Total*	25	26 =	- 2 x	9.00	\$0.00
Independent Claims	2 -	3 =	- 0 x	40.00	\$0.00
Multiple Dependent Claims**	0			135.00	\$0.00
					Total: \$0.00

- \* Includes all independent and single independent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. §1.75(c).
- \*\* If claims added by amendment include Multiple Dependent Claims and there were no Multiple Dependent Claims in application before amendment add \$135.00

## **FEE PAYMENT**

4. The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No. 11-0231. A duplicate copy of this sheet is attached.

Respectfully submitted,

**CUMMINGS & LOCKWOOD** 

Dated: July 2, 2001

George N. Chaclas, Reg. No. 46,608

Attorney for Applicants

Cummings & Lockwood

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